

The 1-2-3s of Enrolling Clients

Client Enrollment is On-Site!

Family PACT clients must be at risk for pregnancy or causing a pregnancy

The following clients would not be eligible:

- Pregnant Sterilized Menopausal
 - Women over 55 and Men over 60

Client Eligibility

Determine if client is eligible for Family PACT

Client Lacks Other Insurance Coverage

- 1. No insurance, including no Medi-Cal
- 2. Has insurance with no family planning coverage for any contraceptive method
- 3. Has Medi-Cal with Share of Cost but has not met Share of Cost
- 4. Has limited-scope Medi-Cal coverage (no family planning coverage)
- 5. Has insurance but has not met the deductible
- 6. Has insurance or full-scope Medi-Cal but must keep family planning services confidential

Income Guidelines

Family size and corresponding income at or below 200% Federal Poverty Level

Residency Requirement

California resident

Client Enrollment

1. Enroll Clients On Site

- Once eligibility has been established, clients fill out a one-page Client Eligibility Certification (CEC) Form which is co-signed by client and provider.
- The CEC is a legal document required to confirm a client's eligibility for services.



Client Enrollment (cont.)

2. Activate a Health Access Programs (HAP) Card Three Ways

Submit the information on the CEC Form to Electronic Data System (EDS) via one of these three ways:

- 1. Automated Eligibility Verification System (AEVS)
- 2. Point of Service (POS)/T7 Device (Family PACT providers are eligible to receive one POS device free of charge)
- 3. Internet

3. Issue HAP Card

- Provider will give the client an activated teal blue HAP Card. These are supplied to providers that have been approved to offer Family PACT.
- Provider must explain Family PACT services to client (i.e., family planning services, not primary care or family practice).
- One card issued per client which can be used by any Family PACT provider.

Remember:

- Eligible clients are activated for one year from activation date. Reactivate client before renewal date to avoid disruption of services or reimbursement.
- You must activate HAP Cards before rendering service.
- Confirm eligibility at each visit, including family size, income, insurance and Medi-Cal coverage.
- Eligibility determination and confirmation is based on information given by client's self-report.